

Exhibit 7



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Transcript of Susan McDonald, Ph.D.

Date: December 19, 2019

Case: Russell, et al. -v- Educational Commission for Foreign Medical Graduates

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IN THE UNITED STATES DISTRICT COURT
FOR THE EASTERN DISTRICT OF PENNSYLVANIA

MONIQUE RUSSELL, JASMINE RIGGINS, : NO.
ELSA M. POWELL, and DESIRE EVANS, : 18-5629
Plaintiffs, :
:
:
v. :
:
EDUCATIONAL COMMISSION FOR :
FOREIGN MEDICAL GRADUATES, :
Defendants. :

- - -

Thursday, December 19, 2019

- - -

TRANSCRIPT OF DEPOSITION OF
SUSAN MCDONALD, Ph.D., taken by and before
Michelle Tormey, Professional Reporter and
Notary Public, at MORGAN, LEWIS & BOCKIUS
LLP, 1701 Market Street, Philadelphia,
Pennsylvania 19103, commencing at 9:10 a.m.

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1 BY MR. CERYES:

2 Q And that they may serve in that
3 role despite not having a subspecialty or
4 specialty in survey methodology or design?

5 A Oh, absolutely.

6 Q You write in your reports -- let's
7 turn to Page 8 -- in the first -- well, the
8 second sentence, she was specifically hired
9 to put numbers to her hypotheses concerning
10 the traumatic effects and life changes
11 experienced by women receiving care from
12 Dr. Akoda.

13 What do you mean by hired to
14 put numbers on her hypotheses?

15 A Well, Dr. Steinberg entered this
16 process with the very strong hypothesis that
17 the women who were treated by Dr. Akoda had
18 experienced harm of various kinds. And it's
19 my understanding based on her own sort of
20 vague description of what her mission was,
21 and what I intuit about the way she seems to
22 use her data, that her goal was to assign
23 numbers to those so that generalizations
24 could be made to the broader universe of
25 other women, the women that were solicited

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1 for the survey, 575, or something like that.
2 So the assumption is when you're talking to
3 hundreds of women that the expectation is
4 that numbers will be generated. And, in
5 fact, she did generate some numbers.

6 Q Now, I want to briefly review some
7 of the various criticisms that you offer in
8 your report.

9 Among the criticisms
10 regarding -- I guess -- the generalizability
11 of the responses is the concept that these
12 women are -- I guess as you characterize here
13 on Page 9 -- alleged victims or financial
14 stakeholders, is that fair?

15 A Let me find the line. I'm not sure
16 that I heard your question correctly. I
17 think you were referring to not alleged --
18 i.e., the participants are consumers or
19 voters -- the not alleged victims or
20 financial stakeholders. And if you're asking
21 me whether I believe that statement is true,
22 the answer is, yes, but I'm not sure what
23 your question really was.

24 Q Given that this population are
25 people who are potential plaintiffs in

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1 litigation -- or, claimants in litigation,
2 would there be any way to assess or survey
3 their potential emotional harm given the
4 potential financial stake that they may have
5 in the outcome of this litigation?

6 A I certainly can't say no, there is
7 no way to do it. There are better ways to do
8 it and there are limitations on the way you
9 interpret the responses of people who have
10 responded versus those who have chosen not
11 to. So it's less about you can never do that
12 and more about understanding the implications
13 of the relationship between these survey
14 participants and the outcome of the case, so
15 that you can put the data in context and you
16 can evaluate its validity as well as its
17 statistical reliability.

18 Q Dr. Steinberg did reference in her
19 report the -- or, at least included a
20 consideration that that's something that she
21 thought about, potential financial interest
22 in the outcome?

23 A She may have. I don't recall that
24 sentence particularly.

25 Q You reference the survey

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1 invitation -- which was sent by lawyers -- in
2 terms of the potential impacts that that
3 invitation might have on the individuals
4 filling out the survey, you've set forth
5 those concerns in your report in their
6 entirety?

7 A I'm sorry. I missed the question.
8 I did mention that, yes, but the entirety
9 part I don't recall.

10 Q Within your report you've explained
11 why you think the invitation itself may have
12 had an impact on the individuals filling out
13 the survey?

14 A Yes, both who chose to and what
15 they might have written.

16 Q At the bottom of Page 9, you refer
17 to Dr. Steinberg making efforts to minimize
18 the potential biasing effects and welcoming
19 them bringing her own confirmation biases to
20 bear in construction of the survey and
21 analysis of the data.

22 What do you mean by
23 "minimizing and welcoming those biasing
24 effects?"

25 MR. SHAFFER: Let me object to the

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1 MR. SHAFFER: Objection to form.

2 THE WITNESS: Well, if someone were
3 to ask me to give examples, I would
4 certainly read them carefully with that
5 eye. But there are a couple that I
6 recall; one, the ripping of the
7 clitoris, I found to be lacking in
8 credibility to me. Not that I dispute
9 the conviction with which that statement
10 was offered, it just didn't necessarily
11 make sense to me. You know, again, I am
12 not here to assert the truthfulness of
13 any given individual. I am only here to
14 talk about the survey and what value it
15 has. And individuals of course may
16 testify in courts or any other place and
17 be cross-examined on that. But I can
18 say from a survey research perspective
19 that I don't know what to do with
20 anything that came out of this survey.

21 BY MR. CERYES:

22 Q Okay. Do these summary statements
23 provide you any information about the
24 individual experiences of the women who
25 completed this survey?

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1 MR. SHAFFER: Objection to form.

2 THE WITNESS: I'm not sure what you
3 mean, exactly; what you're asking me if
4 I now know or feel as a result of
5 reading them.

6 BY MR. CERYES:

7 Q Is there anything included within
8 Exhibit 5 -- the summary statements -- that
9 would allow you to learn anything about the
10 experiences that these women had through
11 their treatment with this individual?

12 A I think that if I were responsible
13 for -- once we start talking about individual
14 women, I think if I were responsible for
15 drawing interpretations about individuals, I
16 would be thinking about qualitative research
17 in which these women were questioned and
18 probed on specific information to fully
19 understand their responses. And what I said
20 earlier still holds. This is not qualitative
21 information. These are verbatims and their
22 interpretation and their meaningfulness
23 without further probing to contextualize and
24 confirm and explain some cases what they
25 meant -- because it's not always clear what

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1 they mean -- would be necessary to make a
2 determination by someone -- not me; it's not
3 my role here -- about the veracity or
4 meaningfulness of any of them.

5 Q Okay. So without going through
6 that process that you described, Exhibit 5
7 provides no meaningful or helpful information
8 about the experiences of these women in your
9 view?

10 MR. SHAFFER: Objection as asked
11 and answered.

12 THE WITNESS: It depends on what
13 you mean by meaningful. I don't know
14 what a judge would do with it. I have
15 no idea. If you present this
16 information this way, I don't know what
17 it's legal bearing has. I can tell you
18 that it is neither qualitative research
19 nor is it quantitative research.

20 BY MR. CERYES:

21 Q Would you defer to a psychiatrist
22 as to whether the verbatims included within
23 Exhibit 5 could be used to reach any opinions
24 about the nature and extent of damages
25 suffered by patients of Igberase/Akoda?

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1 MR. SHAFFER: Objection to form.

2 THE WITNESS: No, I would not
3 because the method by which these data
4 were extracted is not the realm of
5 psychiatric examination. The
6 methodology resides with survey
7 research. This was a process that
8 occurred as a result of survey
9 invitations to women who chose to
10 respond to a survey among -- in a
11 population who chose to respond to
12 invitation to be part of litigation.
13 This is not notes from a psychiatric
14 interview. So Dr. Steinberg can testify
15 with regard to how she would interpret
16 it. She's entitled to do that. But I
17 would not credit this as psychiatric
18 information myself because its source is
19 survey research.

20 BY MR. CERYES:

21 Q Okay. Is it fair to say that in
22 all of the responses and summary statements
23 provided, you would not feel comfortable
24 saying that any of that documentation
25 reflects that any women have experienced harm

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1 by virtue of being treated by Igberase/Akoda?

2 MR. SHAFFER: Objection to form.

3 THE WITNESS: I don't know what to
4 do with this information. And, in
5 part -- again, this is parsing. I don't
6 know what any of these statements
7 themselves mean. I don't know -- in
8 some cases, they're hard to even
9 interpret, just to understand what's
10 being said and what connections are
11 being made. That's one thing.

12 What needs to be parsed is the "as
13 a result of being seen or treated by
14 Dr. Akoda," and it's not clear to me
15 what somebody would have said depending
16 on how they learned about or what
17 information was imparted to them about
18 Dr. Akoda, and that's part of this as
19 well. I mean, that's the 600-pound
20 gorilla in the room. What were these
21 women told about him. What was their
22 experience or their thought process
23 before they were told about him. So is
24 a result of being treated is not exactly
25 the same as a result of being treated